

Supplemental Application Data Sheet

Application Information

Application number:: 10/706,766

Filing Date:: 11/12/03

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: 3738

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: INTERVERTEBRAL SPACER DEVICE

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SPRING

Attorney Docket Number:: SPINE 3.0-446 CIP IV CONT

Request for Early Publication?:: No

Request for Non-Publication?:: No

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: James

Middle Name:: D.

Family Name:: Ralph

City of Residence:: Seaside Park

State or Province of Residence:: NJ

Country of Residence:: US

Street of mailing address:: P.O. Box 99

City of mailing address:: Seaside Park

State or Province of mailing address:: NJ

Postal or Zip Code of mailing address:: 08752

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Stephen

Family Name:: Tatar

City of Residence:: Montville

State or Province of Residence:: NJ

Country of Residence:: US

Street of mailing address:: 45 Upper Mountain Avenue

City of mailing address:: Montville

State or Province of mailing address:: NJ

Postal or Zip Code of mailing address:: 07045

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Joseph

Middle Name:: P.

Family Name:: Errico

City of Residence:: Green Brook

State or Province of Residence:: NJ

Country of Residence:: US

Street of mailing address:: 29 Deer Path Circle

City of mailing address:: Green Brook

State or Province of mailing address:: NJ

Postal or Zip Code of mailing address:: 08812

Correspondence Information

Correspondence Customer Number:: 000530

Representative Information

Representative Customer Number::

51640

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/035,668	11/09/01
10/035,668	Continuation-in-part of	09/982,148	10/18/01

Foreign Priority Information

Assignee Information

Assignee name:: SpineCore, Inc.

Street of mailing address:: 475 Springfield Ave

4th Floor

City of mailing address:: Summit

State or Province of mailing address:: NJ

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